

REQUEST TO CHANGE EMPLOYMENT OPTIONS

Instructions for use:

- Please follow instructions completely and do not add notes or comments
- Fill in the date the form is being submitted
- Fill in the position title for which you are requesting a change
- If you wish to be placed on inactive status until further notice, check box **A**
- Check the appropriate box for the type of employment you will accept (**B, 1, 2, 3, 4, 5**)
- If there is any other type of employment you will accept, check box **6** for Other and fill in the type of employment you will accept
- If you wish to update your application record and be certified only to certain jurisdictions, check box **C**, and mark the jurisdictions in the section below. Check only the jurisdictions to which you wish to be certified. If there is a specific department to which you wish to be certified, write that into the specified box
- Fill in your Driver's License Number
- Fill in the Expiration Date of your Driver's License
- Sign the Form and Print your Name
- Fill in your address
- Fill in your telephone number
- Fill in your email address
- If you are requesting to transfer from one register to another, fill in the appropriate information
- If you wish to email the form to the Personnel Board, click the "Email Form to MCPB"
- Do not mark in the shaded box at the bottom of the form

Mail to: Personnel Director
Mobile County Personnel Board
P.O. Box 66794
Mobile, AL 36660-1794

-or -

Deliver to: Mobile County Personnel Department
1809 Government Street
Mobile, Alabama

-or -

FAX to: (251) 445-2203

-or -

Email: certifications@personnelboard.org